Amendment

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Amendment

□ Yes ▼ No

Do not use this form to updat	e information.							
1. Committee Information								
a. Full Name						c. ID Number		
A BETTER MARSHVILLE	FOR TOMORROW							
b. Mailing Address (include Ci	ty, State and Zip Code)				d. Date Filed		
3103 JULIAN GLEN CR WAXHAW, NC 28173						11/01/2019		
, , , , , , , , , , , , , , , , , , , ,						e. Phone Number		
						(828) 776-2774		
2. Report Year 3. Period Star	rt Date (mm/dd/yy)	4. Period	End Date	(mm/dd/yy)	5. Treasur	rer Full Name		
2019 1	0/22/2019		10/31/20	19	JINGER K	KELLEY		
6. Type of Committee (Check		pe of Repor	t (che	ck only one	type of rep	ort from one category)		
Candidate Campaign Pa	rty Muni			tate/County	A Landau	Referendum		
☐ Joint Fundraiser ☐ PA	C 🗓	Organizatio	CONTRACTOR DESCRIPTION OF THE PARTY OF THE P	Organizatio	nal	☐ Organizational		
	gal Expense Fund	Thirty-five	_	Quarterly		Pre-referendum		
	le, check one)	Pre-primar		7 First		Final		
Booster Fund"	NAMES OF THE OWNER OF THE OWNER.	Pre-electio		200 0.0				
Building Fund			" <u> </u>	Second		Supplemental Final		
		Pre-runoff	.	Third		☐ Annual		
Presidential Election Year Car		Semi-annua	-	-		☐ Special		
NC Public Campaign Financing	g Fund	Mid Ye	ar	Semi-annua	1			
		Year E	nd 🔽	Mid Ye	ar	10. Special Report Name		
Other:		Final		Year E	nd			
8. Number of Fundraisers this	s Report	Special		Final				
	_	- 1		7				
0				Special				
3. Account Information a. Financial Institution Full Na				nt Informati				
	me		a. Financ	cial Institutio	n Full Nam	ie		
FIRST CITIZENS BANK								
b. Purpose	c. Account Code		b. Purpos	E	/FD	c. Account Code		
MAINTAIN RECORD OF	0.1		RECEIVED					
CONTRIBUTIONS &	01				discu land			
EXPENSES	d. Period Begin Bala	nce	NOV 0 1 2019			d. Period Begin Balance		
EM ENGES	di Terrou Degrii Dara	ice	1404 0 1 2013		.013	d. Ferrou Begin Barance		
	\$	0.00	Union (Co. Roard of	\$			
CERTIFICATION			LUMONIA	o positi or	FIELTINUS			
I certify that the Committee	or Fund is in complian	ce with all	nnlicable	nrovisions	of Article 2	2A 22B & 22D 22M of		
Chapter 163 of the NC Gener	ral Statutes and that n	o funda ara	aammina	lad with me	hibited or o	zh, zzb & zzb-zzivi oi		
finds I find a sadification	iai Statutes and that h	o lulius are	comming	led with pro	nibited or o	ther non-disclosed		
funds. I further certify that	this report is complete	true and c	orrect and	that I have	been traine	ed by the NC State Board		
T. V.	11.	\ \ .	1	1 11				
Jinger Ne	Illy	Sm	ALD 1	Cellen		11/01/2019		
Pinted Name of S	Signer	Sign	affire of Ap	pointed Treas	surer	Date		
FOR OFFICE USE ONLY	. ,	0	1	110				
Date Received:	1/01/19	Emplo	yee: 4	Keyes		livery Method Normal Mail		
Date Postmarked:	' '	Emplo	1	(Registered Mail		
Date i Ostiliai ked.		Emplo	yee:		- X	Hand Delivered		
D . C .					1	Electronically Filed		
Date Scanned:		Emplo	yee:					
Date Data Entered:		Emplo	yee:			Signer has not received mandatory training		
Please Note: This form c	annot be used to ame	nd committe	ee informa	ation such as	the commi	ittee address, treasurer		
	nt treasurer, custodiar							
You must amen	d the Statement of Or	ganization (CRO-2100	JA-E) to mak	e committe	e changes.		

Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment ☐ Yes No

1. Committee Full Name (and Fund if applicable)	2. Type of Re		3.	ID Nun	iber
A BETTER MARSHVILLE FOR TOMORROW	2019 Organiz	zational			
Start of Election Cycle: January 1,	2016	Total this Reporting Peri			Total this ection Cycle
4) Cash on Hand at Start		\$	0.00	\$	0.00
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	0.00	\$	0.00
6) Contributions from Individuals	(CRO-1210)	\$	1,800.00	\$	1,800.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	0.00	\$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$	0.00	\$	0.00
9) Loan Proceeds	(CRO-1410)	\$	0.00	\$	0.00
(0) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	0.00	\$	0.00
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	0.00	\$	0.00
11b) Contributions from Not-For-Profit Organizations	s (CRO-1250)	\$	0.00	\$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$	2,500.00	\$	2,500.00
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	0.00	\$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	0.00	\$	0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11	lc,11d and 11e)	\$	4,300.00	\$	4,300.00
EXPENDITURES			CAR SE		
13) Disbursements		MARK			
13a) Operating Expenditures	(CRO-1310)	\$	177.40	\$	177.40
13b) Contributions to Candidates/Political Committees	s (CRO-1310)	\$	0.00	\$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$	0.00	\$	0.00
(4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	0.00	\$	0.00
(5) Loan Repayments	(CRO-1420)	\$	0.00	\$	0.00
(6) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	0.00	\$	0.00
17) In-Kind Contributions	(CRO-1510)	\$	0.00	\$	0.00
(8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	15, 16 and 17)	\$	177.40	\$	177.40
9) Cash on Hand at End (Add lines 4 and 12 together, then s	ubtract line 18)	\$	4,122.60	\$	4,122.60
ADDITIONAL INFORMATION				1	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)	\$	0.00		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	0.00		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	0.00		
4) Account Transfers Within the Committee	(CRO-1720)	\$	0.00		
25) Administrative Support	(CRO-1710)	\$	0.00	\$	0.00
26) Forgiven Loans	(CRO-1440)	\$	0.00	\$	0.00
7) 48-Hour Notice Reports Stum Co. Board of Elections	(CRO-2220)	\$	0.00	\$	0.00
(8) Contributions to be Refunded	(CRO-1215)	\$	0.00	\$	0.00

		rom Individual		ontributions	Pg 1 of 2 under \$50 if form CRO	- 120:	Amendme Ves	No No
		(and Fund if applicab				_	ID Number	
A BET	TER MARSHVI	LLE FOR TOMORR	OW			Τ		
3. Cont	ributor Informati	on		Add 🗆	Remove			
a. Full !	Name, Mailing Ad	dress & Phone		b. Job Title		d.	Comments	
(incl	ide city, state, & z	ip)		CATERIN	G	T		
KATH	ERYN E DAVIS	k				1		
	VENS ST			c. Employer	's Name/Specific Field	4		
WING	ATE, NC 28174			SELF			F1 4' C	1 B (
						e.	Dection Sur	m to Date
						\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy))	k. Amount	Lac 3
	01	Check			10/22/2019		\$	300.00
							\$	
							\$	
3. Cont	ributor Informati	on		Add 🔲	Remove		REAL PROPERTY.	AND RESERVE
a. Full !	Name, Mailing Add	dress & Phone		b. Job Title	Profession	d.	Comments	- All Here
(inclu	ide city, state, & z	ip)		OWNER	The second secon	Г		
	ONY HELMS			- Foundation	I. N (6 18 11 II	1		
	HGHWAY 205 N HVILLE, NC 28	J			's Name/Specific Field	-		
MAKS	TIVILLE, NC 26	103		HELM'S N	AETALS	e.	Dection Sur	n to Date
						\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)		k. Amount	
	01	Check			10/31/2019		s	300.00
							\$	
							\$	
THE RESERVE OF THE PARTY OF THE	ributor Informati			Add 🔲 I	Remove	100		
a. Full Name, Mailing Address & Phone			b. Job Title/Profession			d. Comments		
	ide city, state, & z	ip)		PRESIDEN	VT.			
MATT	HEW MILLS					1		

723 OI	LD WHY 74			c. Employe	r's Name/Specific Field				
MARS	HVILLE, NC 28	3103		PEP INC			e. Election Sum to Date		
						\$		300.00	
. Prior	g. Account Code	int Code h. Form of Payment i. In-Kind Descript		cription	j. Date (mm/dd/yyyy)	k. Amount			
	01	Check			10/31/2019		\$	300.00	
							\$		
							s		
1. Tot	al only this Pa	ge				\$		900.00	
	THE RESERVE OF THE PARTY OF THE	O-1210 Pages	Page CRO-1100)		到到 到100000	\$		1,800.00	

CRO-1210

Amendment

		om Individuals			Pg2 of2		☐ Yes	No No
				ontributions	s under \$50 if form CRC			
		(and Fund if applicab		as log los	对于大型的基本的	2.	ID Number	
A BET	TER MARSHVI	LLE FOR TOMORR	OW					
3. Cont	tributor Informati	on		Add	Remove	A SUIT		
	Name, Mailing Ad			b. Job Title	/Profession	d. (Comments	
(incl	ude city, state, & z	ip)		ATTORN	EY			
	RT PALMER					_		
	DOCTOR BLAIR				r's Name/Specific Field	_		
MARS	SHVILLE, NC 28	3103		ROBERT	PALMER PLLC	e. 1	Dection Su	m to Date
l						-		THE RESERVE OF THE PARTY OF THE
						\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind De	scription	j. Date (mm/dd/yyy	y)	k. Amount	
	01	Check			10/31/2019		\$	300.00
							\$	
							\$	
3. Cont	ributor Informati	on	NO MADE NO	Add	Remove	1101		
a. Full !	Name, Mailing Add	dress & Phone			/Profession	d. 0	Comments	
(inclu	ide city, state, & z	ip)		VICE PRE	ES			
	Y K PIERCE					_		
	CAMDEN RD			c. Employe	r's Name/Specific Field			
WING	ATE, NC 28174			FIRST CI	TIZENS BANK		7 C C	- 1 D 1
							dection Sur	n to Date
1						\$		300.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind De	scription	j. Date (mm/dd/yyyy	y)	k. Amount	
	01	Check			10/22/2019		\$	300.00
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							\$	
3. Cont	ributor Informati	on		Add	Remove			
a. Full N	Name, Mailing Add	dress & Phone		b. Job Title	/Profession	d. (Comments	
(inclu	ide city, state, & z	ip) DECEIV	/FD	PRESIDE	NT			
	WHITLEY	HEULIV		F 1	1 37 (6 16 57 17	_		
	AUSTIN RD	NOV 01 2	019		r's Name/Specific Field			
LOCU	ST, NC 28097			WHITLE	Y INVESTMENTS	e. I	lection Sur	n to Date
		Union Co. Board of	Elections			-	The state of the s	***************************************
c n :				<u> </u>	.	\$		300.00
		h. Form of Payment Check	i. In-Kind Des	scription	j. Date (mm/dd/yyyy	/)	k. Amount	
	01	Спеск			10/31/2019		\$	300.00
							\$	
							\$	
	al only this Pa		114	用。有關	阿利亚斯特	\$		900.00
DODGE VECTOR SHOW	al of ALL CR	O-1210 Pages 6 of Detailed Summary 1	Page CRO-1100)			\$		1,800.00

Other Receipt Sources

				Amendment					
Pg	_1	of	3	☐ Yes	X No				

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

	ull Name (and Fund if	NAME AND POST OF THE OWNER, THE O				2. 1	D Numbe	r
A BETTER MA	ARSHVILLE FOR TO	OMORROW						
3. Type of Recei	pt Source (Please u	se separate CRO-	1250 fo	rms for	each type of Rec	eipt	Source.)	
Interest		butions from Not-for				urces	of Income	2
4. Contributor I			ALTERNATION OF THE PARTY.		move			
a. Full Name, Ma	niling Address & Phone		b. Not	-for-Pro	fit Federal ID#	d. (Comments	
	TING & A/C INC		-					
PO BOX 160	into a A/C inc		c. Out	side So	urce Explanation			
MARSHVILLE	E, NC 28103							
						e. E	ım to Date	
						\$		500.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	ption		i. Date (mm/dd/y	ууу)	j. Amoun	t
01	Check				10/22/2019		\$	500.00
							\$	
4. Contributor I	THE RESERVE TO SERVE THE PROPERTY OF THE PROPE		Add	Re	move	191		
Constitution of the consti	iling Address & Phone		b. Not	-for-Pro	fit Federal ID#	d. C	Comments	
(include city, s	CONTRACTOR OF THE PROPERTY OF							
GAYE CHEVE PO BOX 645	ROLET INC		c. Out	side So	arce Explanation	-		
MARSHVILLE	E. NC 28103		Euromanieracynologia	STORESTON STORES				
	,					e. E	lection Su	m to Date
						\$		300.00
f. Account Code	g. Form of Payment	h. In-Kind Descri	ntion		i. Date (mm/dd/y	_	i Amoun	
01	Check	ar an annu Deserr	10/22/2019			7337		
					10/22/2019		\$	300.00
							\$	
4. Contributor I			Add	Re	move			
	iling Address & Phone		b. Not-	for-Pro	fit Federal ID#	d. C	omments	
(include city, s			4					
H&S PAVING		-N/ED	c. Out	side Sou	rce Explanation	1		
MARSHVILLE	, NC 2810REC	FIVED				1		
	1 1	0 1 2019				e. E	lection Su	m to Date
	MOA	0 1 2013				\$		300.00
f. Account Code	g. Form of Payment	h. In Kind Descri	ption		i. Date (mm/dd/yy	(vv)	i. Amoun	
01	Check Check	July	-		10/31/2019	337		
						_	\$	300.00
5 Table 1	AL. D						\$	
5. Total only		A STATE OF THE STA	10141			\$		1,100.00
(This line goes in	LL CRO-1250 Pag tine 11a of Detailed Sun tine 11b of Detailed Sun tine 11c of Detailed Sun	nmary Page CRO-11 nmary Page CRO-11	00 if Not	-for-Proj		\$		2,500.00

				Amendment				
Pg	2	of	3	☐ Yes	X No			

Use this form to report income not reported on another form. i.e. interest income, not for profit contributions etc.

The state of the s	Committee Full Name (and Fund if applicable) BETTER MARSHVILLE FOR TOMORROW							2. ID Number			
A BETTER MA	AKSHVILLE FOR TO	OMORROW									
3. Type of Recei	pt Source (Please u	se separate CRO-1	250 fo	rms j	for each type of Rec	eipt	Source.)				
Interest		butions from Not-for-	Profit C)rgan	izations X Outside Sc	ources	s of Income				
4. Contributor I			Add		Remove						
	ailing Address & Phone	e	b. Not	-for-l	Profit Federal ID#	d. (Comments				
(include city, s			-								
HALL'S AUCT 217 N ELM ST			c. Out	side	Source Explanation						
MARSHVILLE					•	1					
71	OF CONTROL PROPERTY OF THE PRO					e. I	lection St	m to Date			
						\$		300.00			
f. Account Code	g. Form of Payment	h. In-Kind Descri	ntion		i. Date (mm/dd/y	vvv	i Amoun				
01	Check	III AIII Descri	peron		10/31/2019	Married Street, Square, Square		TOTAL STREET,			
•	Check				10/31/2019		\$	300.00			
							\$				
							Ψ				
4. Contributor I	nformation ailing Address & Phone		Name and Address of the Owner, where		Remove			MISSION			
(include city, s			b. Not-	tor-I	Profit Federal ID#	d. (Comments				
LANDPEDDLA	WITH THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.										
PO BOX 723	AKS I'LI		c. Out	side	Source Explanation	1					
MARSHVILLE	E, NC 28103		DISTRIBUTION OF THE PROPERTY O	etiscono to transci	THE STATE OF THE S						
						e. E	lection Su	m to Date			
						\$		300.00			
f. Account Code	g. Form of Payment	h. In-Kind Descri	otion	1	i. Date (mm/dd/y)	(vvv)	i Amoun				
01	Check	***	10/22/2019								
					10/22/2019		\$	300.00			
							\$				
10 12 1 1							-				
4. Contributor I	niormation iling Address & Phone				Remove Profit Federal ID #	11.0	20000000				
(include city, s			D. NOL-	101-1	ront rederal ID#	a. C	Comments				
THE RESERVE OF THE PERSON NAMED IN	ROCK STORE BBQ)									
			c. Out	side !	Source Explanation						
MARSHVILLE	E, NC 28103RE	JEIVED				_					
		V 0 1 2019				e. E	lection Su	m to Date			
	NO	V 01 2010				\$		150.00			
f. Account Code	g. Form of Payment	h. In-Kind Descri	otion		i. Date (mm/dd/y)	yyy)	j. Amoun				
01	Check Union C	C. Dom's			10/31/2019		\$	150.00			
							2	130.00			
							\$				
5. Total only	this Page	AND DESCRIPTIONS			经国际性级国际 和	\$	N. C.	750.00			
	LL CRO-1250 Pag	700		THE PER		2		750.00			
	LL CRO-1250 Pay		00 161-4	mand)							
	t line 11a of Detailed Suit		SPOREST NAME		Profit Contribution)	\$		2,500.00			
	line 11c of Detailed Sur				Control of the Contro						

Other Rec	eipt Sources		Ρσ	3	of	3	Amenda Yes	nent No
	-	orted on another form. i.e.	-					-
THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	ull Name (and Fund if		ST 502	C THE CO	06.010000	-	ID Numb	
A BETTER MA	ARSHVILLE FOR TO	OMORROW						
3. Type of Recei		se separate CRO-1250 for butions from Not-for-Profit O						
4. Contributor 1		Add		move		新疆 1		
a. Full Name, Ma (include city,	ailing Address & Phone state, & zip)	b. Not-	for-Pro	fit Feder	al ID#	d. (Commen	ts
	LOORING LLC							
214 W MAIN S		c. Outs	side Sou	rce Exp	lanation			
MARSHVILLE								
						e. l	Dection S	Sum to Date
						\$		500.00
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date	(mm/dd/y	уууу)	j. Amou	nt
01	Check			10	/22/2019)	\$	500.00
71							\$	
4. Contributor I	nformation	☐ Add	Rei	nove		2.53	100 K	
	ailing Address & Phone	b. Not-	for-Prof	it Feder	al ID#	d. (Commen	ts
(include city,	THE RESIDENCE OF THE PARTY OF T							
6608 E MARSI		c. Outs	ide Sou	rce Exp	lanation			
MARSHVILLE	s, NC 28103					e. 1	Dection S	um to Date
						\$		150.00
f. Account Code	g. Form of Payment	h. In-Kind Description		i. Date	(mm/dd/y	уууу)	j. Amou	nt
01	Check		era turnio a se mano	-	/31/2019	***	\$	150.00
							\$	
5. Total only	this Page			S S II S		\$		650.00

CRO-1250 NC State Board of Elections December 2007

\$

2,500.00



6. Total of ALL CRO-1250 Pages

(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)

(This line goes in line 11b of Detailed Summary Page CRO-1100 if Not-for-Profit Contribution) (This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

Union Co. Board of Elections

Disbursen						_1_ of			X No	
Use this form to	report expenditures	from the committee	ee for op	perating exper					litical	
	coordinated party ex ull Name (and Fund i					Ph No.	ON 18 1	2. ID Number		
	ARSHVILLE FOR T	The second secon		Contract Con			- 344	2. ID Number	Color St.	
11 551 151	THOIT TIBLE I GIV.	TOMORICO								
3. Type of Disbu		use separate CRO							WITH SERVICE	
M Operating Exp		ributions to Candidat				Coo	ordinat	ed Party Expen	ditures	
4. Payee Inform			100 100 100 100	Add	Remov	The state of the s				
a. Full Name, M (include city, sta	ailing Address & Pho	one		b. Coordinate	d Comn	nittee Na	ame	d. Comments		
CHECKS FOR										
The state of the s	LESS DE INDUSTRIAL PR	KWY	1	c. Level Regis	tered (S	pecify)				
PORTLAND, N			- 1	Federal	THE RESIDENCE AND ADDRESS OF THE PERSON NAMED IN	County				
				State		Municip	ality:	e. Election Su	m to Date	
								\$	52.40	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amo	unt	k. Re	quired Remar	ks	
01	Debit Card	K	10	/28/2019	\$	52.40	CHE	ECKS/DEPOS	IT BKS	
					\$					
4. Payee Inform	ation	CHRESTON OF THE STREET		Add 🔲	Remov	10	SERVICE NAME OF		Harriston, and	
	ailing Address & Pho	one		b. Coordinate	THE RESIDENCE		ame	d. Comments		
(include city, sta	Control of the Contro			THE RESERVE OF THE PARTY OF THE				***************************************		
L2, INC										
	CREEK PKWY			c. Level Regist	STATES SHAPE THE PERSON NAMED IN	A CHARLES AND THE REAL PROPERTY.	*************			
BOTHELL, WA	A 98011		- 1	State	H	County: Municip		e. Election Sum to Date		
			ŀ	- State		Manier	any.			
	-							\$	125.00	
	g. Form of Payment	h. Purpose Code	i. Date	(mm/dd/yyyy)	j. Amo	unt	k. Re	quired Remar	ks	
01	Check	0	10	/23/2019	\$	125.00	CON	NTACT LISTS	S	
					\$					
5. Total only thi	s Page							\$	177.40	
6. Total of ALL	CRO-1310 Pages			STATISTICS	U soll		10.10		HEAR THE LOS	
(This line goes i (This line goes i	in line 13a of Detailed S in line 13b of Detailed S in line 13c of Detailed S	Summary Page CRO-	-1100 if (Contrib to Cand	idates/P		omm)	\$	177.40	
7. Purpose Co	odes (List detailed	expenditure code	in (h.) a	bove)				AND LABOR		
A* - Media	B* - Printin	0	C* - Fu	indraising		D - To	Anoth	her Candidate	-	
E - Salaries F* - Equipment G - Political Par						H* - He	olding	Public Office	Expenses	

K* - Office Expenses

NC State Board of Elections

Amendment

Q* - Donation to Legal Expense Fund

December 2009

RECEIVED NOV 0 1 2019

J - Penalties

* Codes require detailed explanation in required remarks field (k)

I - Postage

O* Other

CRO-1310

Union Co. Board of Elections